(HSQB)

Attachment 4.40-E Page 1 OMB No.:

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE/TERRITORY: WYOMING			
ELIGIBILITY CONDITIONS AND REQUIREMENTS			
SURVEY AND CERTIFICATION EDUCATION PROGRAM			

The State has in effect the following process for investigating complaints of violations of requirements by nursing facilities and monitors onsite on a regular, as needed basis, a nursing facility's compliance with the requirements of subsection (b), (c), and (d) for the following reasons:

- the facility has been found not to be in compliance with such requirements and is in the process of correcting deficiencies to achieve such compliance;
- (ii) The facility was previously found not to be in compliance with such requirements and has corrected deficiencies to achieve such compliance, and verification of continued compliance is indicated; or
- (iii) the State has reason to question the compliance of the facility with such requirements.

The State of Wyoming Medicaid program follows procedures as outlined in "Policy Regarding Complaint Investigation", State of Wyoming, Health Facilities Internal Policy Manual as required by The State of Wyoming Operations Manual.

When a complaint, in writing, is received:

- Assign number and establish complaint file log.
- If complaint involves an accredited hospital forward the complaint to the regional office for approval to investigate.
- Interview complainant before entering the facility.
- Visit facility to investigate complaint. All complaints surveys are unannounced.
- Write a complete narrative summary on findings.
- Write a letter to the complainant regarding the survey results.

When a complaint, by telephone, is received:

- Interview complainant, ask them to submit the complaint in writing.
- Document fm the phone complaint form.
- Program Manager or Quality Assurance Manager will review Complaint Form to make a decision as what to do concerning the complaint. If phone complaint is not followed up in writing, a phone call will be made to the administrator of the facility asking for information to be submitted.
- Review of the situation will be done at the next onsite investigation
- Acknowledge the complaint in a brief narrative for inclusion in the complaint file

Protect complainants, do not volunteer who they are

TN No. <u>9.3-007</u> Supersedes TN No. <u>XEU</u> Approval	Date 4 1 93	Effective Date 3 1/93